

PDSA Worksheet #5 Updated 10.10.17

Instructions: Each place-based community team that is testing improvement changes completes a worksheet for all PDSA cycles completed. Upload to CoLab on the 7th of each month for tests performed the previous month. (Hint: use this worksheet concurrently as you plan, implement, and evaluate the test – don't wait until the end of the month – it can be a good planning and documentation tool throughout the test)

Team: IndyEast Promise Zone

Primary Driver 1: Early Identification of Developmental Needs: Aligned & coordinated community-wide systems promote developmental health and early identification of developmental needs for all children & families, especially those that are vulnerable

Secondary Driver 1: Screening is conducted in a variety of settings so all children are assessed (i.e. well-child visits, childcare settings, WIC & SNAP appointments, home visits, etc.)

Change Idea 1a: Use a system map to identify all locations / services in the community where screenings occurs (well-child visits, childcare settings, WIC & SNAP appointments, home visits, etc.)

Objective for this PDSA Cycle: To understand if medical homes are providing developmental screenings. To determine how often screenings are being administered and how the process is facilitated with families.

Is this cycle used to develop, test, implement, or spread a change?

This PDSA cycle will focus on testing a survey tool that is aimed at getting physician buy-in for the ECCS CoIIN Impact project in order to start to make small tests of change.

What question(s) do we want to answer on this PDSA cycle?

What developmental screening, monitoring, and assessment are you providing? What tool(s) are you using? What is the process of administering it with the family? How often is it being administered? Is any information being sent home with families? Would you be willing to partner with our ECCS efforts?

Plan:

Answer questions: Who, What, When, Where will the test of change occur?

Who: Health care providers who provide services to families who are pregnant or have children ages 0-5 in the 46201 area

What: Distribute a survey to various physicians and clinics within the area to figure out whether they are providing developmental screenings, monitoring, and/or assessments.

Survey Questions:

Do you conduct developmental screenings?

If yes, what tool do you use?

How often do you conduct developmental screenings?

What information is being shared with families about developmental screenings?

What is the follow-up process once a screen is conducted?

Do you conduct developmental surveillance?

If yes, what tool do you use?

How often do you conduct developmental surveillance?

What information is being shared with families about developmental surveillance?

What is the follow-up process once a surveillance is conducted?

How do you monitor a child's development?

Are there tools that you share with families on how they can best monitor their child's development at home?

Would you be willing to partner with the Early Childhood Comprehensive Systems CoIIN Impact project to improve our Early Childhood systems for our Near Eastside youth?

When: September 8 – September 22, 2017

Where: People's Health Center

Plan for collection of data: Who, What, When, Where?

Dr. Sherer will review and edit survey tool. Dean Johns – Place based team will create into a Survey Monkey and share link with Dr. Sherer to disseminate among physicians at People's Health Center and HealthNet sites serving the Promise Zone residents.



Predictions (for questions above based on plan):

We predict that physicians at these named medical homes will be providing developmental screenings.

Do:

Provider Survey was reviewed and edited by Dr. Sherer. Final draft was designed as a ten question online survey.



Study:

Dr. Sherer sent the link to six providers: physician at Eskenazi Cottage Corner, Eskenazi North Arlington, 2 physicians at Eskenazi Forest Manor, and 2 physicians at Jane Pauley Community Health Center (16th St.). Concerned about the lack of responders, we began calling clinics and local health care centers thought to service children and families in the community. We shared the link with additional three agencies.

Total of 4 total responders.

| 1. | Do you see patients who are newborn through 3 years old? | |
|----|--|--|
|----|--|--|

| 2. Do you see patients who are newborn through 3 years old? 100% Health Cl | 2. | Do you see patients who | are newborn through 3 years old? | 100% Health Clinics |
|--|----|-------------------------|----------------------------------|---------------------|
|--|----|-------------------------|----------------------------------|---------------------|

3. Do you conduct developmental screenings?

4. If you answered yes to conducting screenings, what tool do you use? 100% Ages and Stages (2 responders)

5. How often do you conduct developmental screenings?

6. How many physicians and advance practice nurses see children age newborn to 3 years old at your practice?

7. How many of these providers regularly use a developmental screening tool?

8. Are there specific resources that you share with families on how to best monitor their child's development at home?

9. Are there specific resources that you share with families on how to best monitor their child's development at home?

10. Would you be willing to partner with the Early Childhood Comprehensive Systems CollN Impact project being implemented through the Indiana State Department of Health to improve child development outcomes by three years of age?

50 % yes (only see children 5+)

50% yes 50% no

50% 9 months and 100% 18 months

4 including me; 3 MD, 2 MP, and 1 PA; 0

All 4

50 % verbal 50% verbal and written

100% yes and The ASQ questionnaire

50% yes 1.

Act:

Are we ready to make a change? Plan for the next cycle.

We will run this cycle one more time and leverage the phone call strategy. We will contact the recipients of the survey to see if we can increase the response rate and learning.